

**SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER**

<b>Superior Court of California, County of Placer</b> Juvenile Division 11270 B Avenue Auburn, CA 95603	<b>FOR COURT USE ONLY</b>
<b>CERTIFICATE OF COMPETENCY TO PRACTICE IN JUVENILE DEPENDENCY COURT</b>	

I, \_\_\_\_\_, Attorney at Law, licensed to practice in the State of California, have completed the following:

☐ Eight (8) hours of training or education in juvenile dependency law or related subjects as set forth in CRC 5.660 and Local Rule 50.3.

Course Title: \_\_\_\_\_.  
(Attach copies of MCLE certificates or other attendance documentation)

☐ Six (6) months experience in dependency proceedings.

Court Location: \_\_\_\_\_.

The experience, training or education occurred during the calendar year(s): \_\_\_\_\_.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct and that this Certificate of Competency was executed on \_\_\_\_\_.

\_\_\_\_\_  
Attorney Signature

\_\_\_\_\_  
State Bar Number